

July 1, 2005

Montana Medicaid Notice

Physicians, Mid-Level Practitioners, Public Health Clinics, FQHCs, RHCs, Hospital Inpatient and Outpatient, and Indian Health Services Providers

VFC Update

The vaccines provided by Vaccines for Children (VFC) as of July 1, 2005 and after are:

- 90633 - Hepatitis A vaccine, pediatric/adolescent dosage (2 dose schedule)
- 90645 - Hemophilus influenza b vaccine (Hib), HbOC conjugate (4 dose schedule)
- 90647 - Hemophilus influenza b vaccine (Hib), PRP-OMP conjugate (3 dose schedule)
- 90648 - Hemophilus influenza b vaccine (Hib), PRP-T conjugate (4 dose schedule)
- 90655 - Influenza virus vaccine, split virus, preservative free, for children 6-35 months
- 90656 - Influenza virus vaccine, split virus, preservative free, for individuals 3 years and above
- 90657 - Influenza virus vaccine, split virus, for children 6-35 months
- 90658 - Influenza virus vaccine, split virus, for individuals 3 years and above
- 90669 - Pneumococcal conjugate vaccine, polyvalent, for children under 5 years
- 90700 - Diphtheria, tetanus toxoids, and acellular pertussis vaccine (DTaP), for individuals younger than 7 years
- 90707 - Measles, mumps and rubella virus vaccine (MMR), live
- 90713 - Poliovirus vaccine, inactivated (IPV)
- 90714 - Tetanus and diphtheria toxoids (Td), preservative free, for individuals seven years or older
- 90716 - Varicella virus vaccine, live
- 90718 - Tetanus and diphtheria toxoids (Td), for individuals seven years or older
- 90723 - Diphtheria, tetanus toxoids, acellular pertussis vaccine, Hepatitis B, and poliovirus vaccine, inactivated (DtaP-HepB-IPV)
- 90732 - Pneumococcal polysaccharide vaccine, 23-valent, adult or immunosuppressed patient dosage, for individuals 2 years or older
- 90743 - Hepatitis B vaccine, adolescent (2 dose schedule)
- 90744 - Hepatitis B vaccine, pediatric/adolescent dosage (3 dose schedule)
- 90748 - Hepatitis B and Hemophilus influenza b vaccine (HepB-Hib)

The reimbursement for dates of service July 1, 2005 and after has increased to \$14.13 per VFC vaccine administration. The reimbursement for dates of service before July 1, 2005 is \$9.50 per VFC vaccine administration.

As a reminder -- for Rural Health Clinics (RHCs) and Federally Qualified Health Centers (FQHCs) only:

VFC vaccines can be administered at RHCs and FQHCs. However, they generally are not billable visits because a core provider is not the health care professional administering the vaccine. VFC costs are calculated into your all-inclusive prospective payment rate.

Contact Information

For claims questions or additional information, contact Provider Relations:

Provider Relations in Helena and out-of-state: (406) 442-1837

In-state toll-free: 1-800-624-3958

Visit the Provider Information website:

<http://www.mtmedicaid.org>